



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				003			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

☐ Check Here if No Discharge

RMS file: WQ/Sew/IW/ Tech Rpts

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS					
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****					
	PERMIT REQUIREMENT	Report Annl Avg	*****		*****	*****	*****		*****		1/year	Estimate	
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.					
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab	
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L					
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab	
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L					
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab	
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L					
	PERMIT REQUIREMENT	*****	*****		*****	15 Annl Avg	*****		*****		1/year	Grab	
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L					
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab	
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L					
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).				TELEPHONE		DATE					
TYPED OR PRINTED													
						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS						
Total Manganese	SAMPLE MEASUREMENT	*****	*****		*****		*****							
	PERMIT REQUIREMENT	*****	*****	*****	*****	Report Annl Avg	*****	mg/L		1/year	Grab			
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
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Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****			
	PERMIT REQUIREMENT	Report Avg Mo	*****		*****	*****	*****		*****		1/6 months
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****		1/6 months
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****		1/6 months
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****		1/6 months
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	15 Avg Mo	*****		*****		1/6 months
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****		1/6 months
Total Barium	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****		1/6 months
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS						
Flow	SAMPLE MEASUREMENT				****	****	****							
	PERMIT REQUIREMENT	Report Avg Mo	Report Daily Max	MGD	****	****	****	****		Continuous	Recorded			
pH	SAMPLE MEASUREMENT	****	****			****								
	PERMIT REQUIREMENT	****	****	****	6.0 Min	****	9.0 Max	S.U.		1/day	Grab			
Dissolved Oxygen	SAMPLE MEASUREMENT	****	****			****	****							
	PERMIT REQUIREMENT	****	****	****	5 Min	****	****	mg/L		1/day	Grab			
Temperature Jan 1-31	SAMPLE MEASUREMENT	****	****		****		****							
	PERMIT REQUIREMENT	****	****	****	****	75 Daily Avg	****	°F		1/day	I-S			
Temperature Feb 1-29	SAMPLE MEASUREMENT	****	****		****		****							
	PERMIT REQUIREMENT	****	****	****	****	75 Daily Avg	****	°F		1/day	I-S			
Temperature Mar 1-31	SAMPLE MEASUREMENT	****	****		****		****							
	PERMIT REQUIREMENT	****	****	****	****	81 Daily Avg	****	°F		1/day	I-S			
Temperature Apr 1-15	SAMPLE MEASUREMENT	****	****		****		****							
	PERMIT REQUIREMENT	****	****	****	****	83 Daily Avg	****	°F		1/day	I-S			
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Temperature Apr 16-30	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	97 Daily Avg	*****			1/day	I-S			
Temperature May 1-15	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	89 Daily Avg	*****			1/day	I-S			
Temperature May 16-31	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	108 Daily Avg	*****			1/day	I-S			
Temperature Jun 1-15	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	104 Daily Avg	*****			1/day	I-S			
Temperature Jun 16-30	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	106 Daily Avg	*****			1/week	I-S			
Temperature Jul 1-31	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	98 Daily Avg	*****			1/day	I-S			
Temperature Aug 1-31	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F						
	PERMIT REQUIREMENT	*****	*****		*****	94 Daily Avg	*****			1/day	I-S			
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS										
Temperature Sep 1-15	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	95 Daily Avg	*****		1/day	I-S								
Temperature Sep 16-30	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	86 Daily Avg	*****		1/day	I-S								
Temperature Oct 1-15	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	84 Daily Avg	*****		1/day	I-S								
Temperature Oct 16-31	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	80 Daily Avg	*****		1/day	I-S								
Temperature Nov 1-15	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	80 Daily Avg	*****		1/day	I-S								
Temperature Nov 16-30	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	75 Daily Avg	*****		1/day	I-S								
Temperature Dec 1-31	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	°F										
	PERMIT REQUIREMENT	*****	*****		*****	77 Daily Avg	*****		1/day	I-S								
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CBOD5 May 1 - Oct 31	SAMPLE MEASUREMENT			lbs/day	****			mg/L								
	PERMIT REQUIREMENT	46 Avg Mo	91 Daily Max		****	13 Avg Mo	26 Daily Max		1/week	24-Hr Composite						
CBOD5 Nov 1 - Apr 30	SAMPLE MEASUREMENT			lbs/day	****			mg/L								
	PERMIT REQUIREMENT	91 Avg Mo	182 Daily Max		****	26 Avg Mo	52 Daily Max		1/week	24-Hr Composite						
Total Suspended Solids	SAMPLE MEASUREMENT			lbs/day	****			mg/L								
	PERMIT REQUIREMENT	175 Avg Mo	350 Daily Max		****	50 Avg Mo	150 Daily Max		1/week	24-Hr Composite						
Oil and Grease	SAMPLE MEASUREMENT			lbs/day	****			mg/L								
	PERMIT REQUIREMENT	52 Avg Mo	105 Daily Max		****	15 Avg Mo	30 Daily Max		1/week	3 Grabs/24 Hours						
Fecal Coliform May 1 - Sep 30	SAMPLE MEASUREMENT	****	****	****	****		****	CFU/ 100 ml								
	PERMIT REQUIREMENT	****	****		****	200 Geo Mean	****		1/week	Grab						
Fecal Coliform Oct 1 - Apr 30	SAMPLE MEASUREMENT	****	****	****	****		****	CFU/ 100 ml								
	PERMIT REQUIREMENT	****	****		****	2,000 Geo Mean	****		1/week	Grab						
Ammonia-Nitrogen May 1 - Oct 31	SAMPLE MEASUREMENT			lbs/day	****			mg/L								
	PERMIT REQUIREMENT	4.6 Avg Mo	9.1 Daily Max		****	1.3 Avg Mo	2.6 Daily Max		1/week	24-Hr Composite						
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Ammonia-Nitrogen Nov 1 - Apr 30	SAMPLE MEASUREMENT			lbs/day	*****			mg/L			
	PERMIT REQUIREMENT	13.7 Avg Mo	27.3 Daily Max		*****	3.9 Avg Mo	7.8 Daily Max		1/week	24-Hr Composite	
Total Aluminum	SAMPLE MEASUREMENT			lbs/day	*****			mg/L			
	PERMIT REQUIREMENT	2.3 Avg Mo	4.6 Daily Max		*****	0.58 Avg Mo	1.16 Daily Max		1/month	24-Hr Composite	
Total Iron	SAMPLE MEASUREMENT			lbs/day	*****			mg/L			
	PERMIT REQUIREMENT	5.2 Avg Mo	10.3 Daily Max		*****	1.3 Avg Mo	2.6 Daily Max		1/month	24-Hr Composite	
Total Manganese	SAMPLE MEASUREMENT			lbs/day	*****			mg/L			
	PERMIT REQUIREMENT	4.0 Avg Mo	8.0 Daily Max		*****	1.0 Avg Mo	2.0 Daily Max		1/month	24-Hr Composite	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	<small>I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</small>	TELEPHONE		DATE			
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				010			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Quarterly

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

☐ Check Here if No Discharge

RMS file: WQ/Sew/IW/ Tech Rpts

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Dissolved Solids	SAMPLE MEASUREMENT		*****	lbs/day	*****		*****	mg/L			
	PERMIT REQUIREMENT	Report Avg Qrtly	*****		*****	Report Avg Qrtly	*****			1/quarter	24-Hr Composite
Chloride	SAMPLE MEASUREMENT		*****	lbs/day	*****		*****	mg/L			
	PERMIT REQUIREMENT	Report Avg Qrtly	*****		*****	Report Avg Qrtly	*****			1/quarter	24-Hr Composite
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).	TELEPHONE		DATE			
		TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

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Petrolia, PA 16050

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LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				010			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY		TO	YEAR	MO	DAY

Reporting Frequency: Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

☐ Check Here if No Discharge

RMS file: WQ/Sew/IW/ Tech Rpts

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Sulfate	SAMPLE MEASUREMENT		*****	lbs/day	*****		*****	mg/L			
	PERMIT REQUIREMENT	Report Annual Avg	*****		*****	Report Annual Avg	*****		1/year	24-Hr Composite	
Bromide	SAMPLE MEASUREMENT		*****	lbs/day	*****		*****	mg/L			
	PERMIT REQUIREMENT	Report Annual Avg	*****		*****	Report Annual Avg	*****		1/year	24-Hr Composite	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

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COMMENTS (Report all violations on the "Non-Compliance Reporting Form")

NAME Sonneborn, Inc.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666

PERMIT NUMBER

021

OUTFALL NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY

Reporting Frequency: Semi-Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

___ Check Here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****				
	PERMIT REQUIREMENT	Report Avg Mo	*****		*****	*****	*****		*****	1/6 months	Estimate	
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.				
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****	1/6 months	Grab	
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****	1/6 months	Grab	
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****	1/6 months	Grab	
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	15 Avg Mo	*****		*****	1/6 months	Grab	
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****	1/6 months	Grab	
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****		*****	1/6 months	Grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).			TELEPHONE				DATE			
TYPED OR PRINTED					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE		NUMBER		YEAR	
COMMENTS (Report all violations on the "Non-Compliance Reporting Form")												



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				021			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY		TO	YEAR	MO	DAY

Reporting Frequency: Semi-Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

RMS file: WQ/Sew/IW/ Tech Rpts

___ Check Here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

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WATERSHED 17-C

PA0002666				022			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Annually

DMR Effective From: January 1, 2015

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RMS file: WQ/Sew/IW/ Tech Rpts

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****				
	PERMIT REQUIREMENT	Report Annl Avg	*****		*****	*****	*****		*****		1/year	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	15 Annl Avg	*****		*****		1/year	Grab
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).				TELEPHONE		DATE				
TYPED OR PRINTED												
						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				022			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY		TO	YEAR	MO	DAY

Reporting Frequency: Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

RMS file: WQ/Sew/IW/ Tech Rpts

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NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****			1/year	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

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Butler County

WATERSHED 17-C

PA0002666				023			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Semi-Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

RMS file: WQ/Sew/IW/ Tech Rpts

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE								
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS											
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****												
	PERMIT REQUIREMENT	Report Avg Mo	*****		*****	*****	*****		*****		1/6 months	Estimate							
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.											
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab								
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L											
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab								
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L											
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab								
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L											
	PERMIT REQUIREMENT	*****	*****		*****	15 Avg Mo	*****			1/6 months	Grab								
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L											
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab								
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L											
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).			TELEPHONE			DATE											
TYPED OR PRINTED					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT														
					AREA CODE			NUMBER			YEAR			MO			DAY		

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				023			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY		TO	YEAR	MO	DAY

Reporting Frequency: Semi-Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

RMS file: WQ/Sew/IW/ Tech Rpts

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Avg Mo	*****			1/6 months	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

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FACILITY Sonneborn

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Butler County

WATERSHED 17-C

PA0002666				024			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Annually

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DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

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RMS file: WQ/Sew/IW/ Tech Rpts

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS				
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****				
	PERMIT REQUIREMENT	Report Annl Avg	*****		*****	*****	*****		*****		1/year	Estimate
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L				
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year	Grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).				TELEPHONE		DATE				
TYPED OR PRINTED												
						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Facility Type: **MAJOR**

PERMITTEE NAME/ADDRESS

NAME Sonneborn, Inc.

ADDRESS 100 Sonneborn Lane
Petrolia, PA 16050

FACILITY Sonneborn

LOCATION Fairview Township
Butler County

WATERSHED 17-C

PA0002666				024			
PERMIT NUMBER				OUTFALL NUMBER			

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	

Reporting Frequency: Annually

DMR Effective From: January 1, 2015

DMR Effective To: December 31, 2019

Permit Expires: December 31, 2019

Permit Application Due: July 4, 2019

RMS file: WQ/Sew/IW/ Tech Rpts

___ Check Here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****			1/year	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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PA0002666
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025
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YEAR	MO	DAY	TO	YEAR	MO	DAY	

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow	SAMPLE MEASUREMENT		*****	MGD	*****	*****	*****	*****			
	PERMIT REQUIREMENT	Report Annl Avg	*****		*****	*****	*****		*****		1/year
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	S.U.			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
CBOD5	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
Total Suspended Solids	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
Oil and Grease	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
Total Aluminum	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
Total Iron	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****		*****		1/year
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Manganese	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****	mg/L			
	PERMIT REQUIREMENT	*****	*****		*****	Report Annl Avg	*****			1/year	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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COMMENTS (Report all violations on the "Non-Compliance Reporting Form")



INSTRUCTIONS FOR COMPLETING DISCHARGE MONITORING REPORTS (DMRs)

General

One or more Discharge Monitoring Reports (DMRs) are attached to your permit for reporting the results of self-monitoring activities as required by your permit. You should make copies of the DMRs for your ongoing use, unless you elect to participate in the Department of Environmental Protection's (DEP's) electronic DMR (eDMR) program (see www.dep.state.pa.us/edmr).

- Reporting frequencies will vary depending on the monitoring frequencies listed in your permit, and are generally monthly, quarterly semi-annually and annually.
- Your reports must be received by DEP on the 28th day of the month following the end of the reporting period, unless otherwise specified in Part C of your permit.
- Your permit may require submission of DMRs to other agencies, including the U.S. Environmental Protection Agency (EPA).
- If you receive DMRs in the mail from EPA, please discontinue use of DMR Form No. 3800-FM-BPNPSM0462 and begin using EPA's DMRs.
- DMRs will generally include pre-populated information for permittee name and address, facility location, permit number, outfall number, permit expiration date, parameter names, and permit requirements. If you identify any errors on a DMR issued by DEP, please contact the DEP regional office that issued your permit. If you identify any errors on a DMR issued by EPA, please contact DEP's Central Office at 717-787-6744.
- You may use computer-generated replicas of Form No. 3800-FM-BPNPSM0462 or of EPA's DMR if you receive prior approval from DEP and EPA.

Instructions

1. Enter statistical results into each blank field below the "VALUE" column headers. Results must be reported in the same units shown on the DMR.
2. Sum the total number of excursions or exceedances of permit limits across the row for each parameter and enter the value into the "NO. EX" field. For example, if the permit contains limits of 6.0 S.U. (Minimum) and 9.0 S.U. (Maximum) for pH, and the Minimum and Maximum results are 5.9 S.U. and 9.1 S.U., respectively, enter "2" into the "NO. EX" field.
3. Report the actual sampling frequency and sample type utilized during the reporting period in the fields corresponding to "Frequency of Analysis" and "Sample Type", respectively.
4. Type the name of the principal executive officer (or an authorized agent designated by a principal executive officer) who is taking responsibility for the report, sign the report (should be in ink), enter the telephone number of the responsible individual, and record the date that the report was signed. Mail only original, signed copies of DMRs.
5. In the Comments section at the bottom of the DMR, you may write a brief summary of violations in this section; however, DEP requests that all violations during the monitoring period be reported in more detail on DEP's **Non-Compliance Reporting Form** (3800-FM-BPNPSM0440) and be submitted as an attachment to the DMR. Other uses of the Comments Section include explanations of attachments to the DMR, explanations for the unavailability of data, and brief summaries of issues that have affected operations or effluent quality during the monitoring period. Always consider attaching a letter or separate document to explain your situation in more detail.

No Discharge or No Data Available

If there was no discharge at all from an outfall during the monitoring period, check the “No Discharge” box on the top of the DMR. Complete the information above and below the table and mail the DMR to the appropriate agencies. Be sure to sign and date the DMR.

If there was no discharge of a specific parameter (e.g., if a chlorine limit is in the permit but chlorine was not used for disinfection during the entire reporting period), or if data are not available for a specific parameter for the entire reporting period, do not leave the DMR blank. Instead, report one of the following No Data Indicator (NODI) codes that apply to your situation in the appropriate value field, and **provide an explanation as an attachment to the DMR**:

- A** Use if you are exempted from monitoring the parameter because of a General Permit condition.
- E** Use if all samples or results are not available for the reporting period due to equipment failure or because sample collection was overlooked or samples could not be collected for the parameter.
- GG** Use if your permit requires sample collection and analysis only under certain conditions and those conditions were not met during the reporting period (e.g., report chlorine results only when chlorination system is used).
- FF** Other: use if there is any reason for the absence of data that is not covered by those above.

If you have at least one result for a parameter, the value should be reported and not a NODI code.

Calculations

The following explains how to calculate statistical values that are commonly required by permits:

Monthly Average – For Loading (lbs/day), sum the total of daily loadings and divide by the number of samples during the month. To calculate the daily loading, multiply the daily concentration (mg/l) by the flow (MGD) on the date of sampling and a conversion factor of 8.34. For Concentration, sum the total of daily concentrations and divide by the number of samples.

Weekly Average – For Loading (lbs/day), sum the total of average daily loadings during each week of the reporting period (beginning on a Sunday and ending on a Saturday) and divide by the number of samples during the week. For Concentration, sum the total of daily concentrations each week and divide by the number of samples. Report the maximum weekly average on the DMR.

Maximum Daily (“Daily Max”) – Report the maximum concentration or load measured during a 24-hour period during the reporting period; if multiple measurements are taken daily, include all data in the analysis.

Instantaneous Maximum (“IMAX”) – Report the maximum result obtained by a grab sample for a specific pollutant over the entire reporting period covered by a DMR.

Instantaneous Minimum (“Minimum”) – Report the minimum result obtained by a grab sample for a specific pollutant over the entire reporting period covered by a DMR.

Total Monthly Load (lbs) – Sum the total of average daily loadings, divide by the number of samples during the month, and multiply by the number of days in the month.

Geometric Mean – Report the average of a set of n sample results given by the n th root of their product. If any result is zero (0), substitute 1 for the calculation. For example, five samples were analyzed with the following results: 20, 300, 400, 500, and 0. The calculation of geometric mean is as follows (note that you will need to use the power function on a calculator):

$$\sqrt[5]{20 \cdot 300 \cdot 400 \cdot 500 \cdot 1} = \sqrt[5]{1,200,000,000} = (1,200,000,000)^{1/5} = 65$$

Non-Detect Data**Conventional and Toxic Parameters**

For calculating average values of data sets in which there are some "detections" (results at or above the laboratory reporting limit) and some "non-detect" data (results reported below the laboratory reporting limit), use the reporting limit for non-detect data. In other words, ignore the less than (<) symbol for statistical calculations and include the < symbol with the statistical result if there is at least one non-detect result in the data set. For example, four samples were analyzed with the following results: < 1.0, 2.0, < 1.0, and 1.0. The average statistical result is < 1.3.

Where the permit includes an effluent limitation for a parameter that is less than the most sensitive detection limit available, and the laboratory reports a value at or below the lowest level specified by the permit, you may use zero (0) in the calculation in lieu of the reporting limit, if the parameter is identified in 25 Pa. Code Chapter 16, Appendix A, Tables 2A and 2B. In general, parameters with limitations that are less than the most sensitive detection limit will be identified in Part C of the permit, if applicable.

Bacteria Parameters

Report all "non-detect" (e.g., < 2) and "too numerous to count" (TNTC) (e.g., > 2,000) results on DMR supplemental forms as reported by the laboratory. Do not report "TNTC" on supplemental forms, but instead report a value qualified with the ">" symbol. Where a data set includes one or more "non-detect" and/or TNTC results, calculate the geometric mean by ignoring qualifying symbols, but report the value with the symbol. If a data set includes both ">" and "<" qualifiers, the ">" qualifier takes precedence for reporting. For all "non-detect" values, specify in the Comments section of the DMR the maximum volume filtered at the laboratory.

Example 1 – For results are determined, < 2, 10, 20, and 30. The geometric mean should be reported as $< (2 \bullet 10 \bullet 20 \bullet 30)^{0.25} = < 10$. Specify the maximum volume filtered for the < 2 result in the DMR Comments.

Example 2 – Three results are determined, < 2, 1,000, and > 2,000. The geometric mean should be reported as $> (2 \bullet 1,000 \bullet 2,000)^{0.333} = > 158$.

Rounding and Precision

Statistical values reported on the DMR should be rounded to the same number of decimal places as the limit for the parameter as set forth in the permit. If the permit does not contain a limit but requests monitoring only, statistical values for concentration results should be rounded to the maximum number of decimal places in the data set as reported by the laboratory or the instrument used for analysis. If mass loads must be reported and there is no limit, round statistical values to the nearest whole number, unless the calculated number is less than one, in which case the value should be rounded to one significant figure (e.g., 0.1, 0.05, etc.). If the number you are rounding is followed by 5, 6, 7, 8, or 9, round the number up, otherwise round down.

The documents "Discharge Monitoring Reports Overview and Summary" (3800-BK-DEP3047) and "Management of Non-Detect Results for Discharge Monitoring Reports" (3800-FS-DEP4262) contain more information and are incorporated by reference. These documents are available on DEP's website.